



Aging and Disability Services Division
Interpreter/CART Registry
3416 Goni Rd., Suite D-132
Carson City, NV 89706

Form D 3/4 – Professional Development Plan

Phone: 775-687-4210

Fax: 775-687-0576

Email: jabalderson@adsd.nv.gov

Interpreter Name: _____

Date: _____

Mentor Name: _____

Date: _____

Interpreter Classification: **(Please pick one)**

Educational Setting: Cued Speech Transliterator

Educational Setting: Apprentice Level (EIPA 3.0)

Educational Setting: Intermediate Level (EIPA 3.1-3.9)

Employer(School name): _____

Interpreter signature: _____

Date: _____

Supervisor: _____

Date: _____

Signature

Page 2- Form E: Example & Direction for filling out page 3 format

If you have taken the EIPA, utilize the feedback from EIPA to develop your plan. If you have not taken the EIPA utilize the format; however come up with the objectives with assistance from your mentor or other certified professionals.

The goals below reflect the areas assessed by the EIPA. The Objectives describe how you plan to achieve the stated goal. For example in the area of **“Voice to Sign”** the EIPA may identify **“*Marking topic-comment structures more strongly with body shifts, raised eyebrows and appropriate pacing*”** or other identified areas for professional development. Use the chart below to describe the process you will use to achieve your objectives.

Goal #1: Improve Voice to Sign	Steps & Strategies	Timeframe for each step	Evaluation of step/strategy	Success measures of steps/strategy	Outcomes
Objective a:					
Objective b:					
Objective c:					
Goal #2: Improve Sign to Voice	Steps & Strategies	Timeframe for each step	Evaluation of step/strategy	Success measures of steps/strategy	Outcomes
Objective a:					
Objective b:					
Objective c:					

Goal #3: Vocabulary	Steps & Strategies	Timeframe for each step	Evaluation of step/strategy	Success measures of steps/strategy	Outcomes
Objective a:					
Objective b:					
Objective c:					
Goal #4: Overall factors	Steps & Strategies	Timeframe for each step	Evaluation of step/strategy	Success measures of steps/strategy	Outcomes
Objective a:					
Objective b:					
Objective c:					
Goal #5: Other	Steps & Strategies	Timeframe for each step	Evaluation of step/strategy	Success measures of steps/strategy	Outcomes
Objective a:					
Objective b:					
Objective c:					